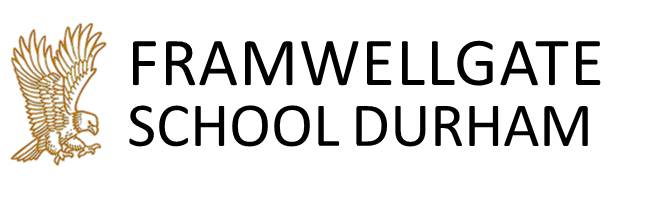
****

**Application Form : Teaching Post**

**Strictly Confidential**

**Position :**  **Closing Date:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Surname** | |  | | | **Title** | |  |
| **Forename(s)** | |  | | | | | |
| **Address (**if this is a temporary address, please also give us your usual home address) | | | | | | | |
|  | | | |  | | | |
| **Postcode** |  | | | **Postcode** | |  | |
| **National Insurance Number** |  | | | **Mobile** | |  | |
| **Home Telephone** |  | | | **Work Telephone**  **(if convenient)** | |  | |
| **Email address** |  | | | | | | |
| **Declaration**  You are required to state in writing whether to the best of your belief you are related to a Trustee, Governor, or Senior member of staff, or the partner of such persons. | | | | | | | |
| Name | | | Relationship | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **A : Education** (appointment will only be confirmed subject to receipt of official certificates in support of below | | | |
| **School/College Attended** | **Qualifications**  **(inc. subject (s))** | **Grades** | **Date Achieved** |
|  |  |  |  |
| **Higher Education Institution Attended** | **Degree / Higher Advanced Degree/ Diploma / Certificate** | **Degree Class/ Division** | **Date of Award** |
|  |  |  |  |
| **NPQH** | YES / NO | **Date obtained** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **B : In Service Training** | | | |
| **Establishment** | **From** | **To** | **Course Taken** |
|  |  |  |  |
| Subsidiary subjects offered : | |  | |
| Particulars of residence abroad (for MFL posts) : | |  | |

**C : Employment Details (teaching service)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Present employment :** | | | | | | |
| Please state whether present appointment is permanent or temporary?  Period of notice required or termination date? | | | | | | |
| Full or part time | Salary grade / group (indicating any allowances) | Name of establishment | Number on  Roll | Age  Range | Local  Authority | Date of Appointment |
|  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Previous appointments*** (giving most recent first) | | | | | | | | |
| Post | Full or part time | Salary grade / group (indicating allowances) | Name of establishment | Number on Roll | Age  Range | Local Authority | Dates of Employment | |
| From | To |
|  |  |  |  |  |  |  |  |  |
| ***Previous appointments*** *continued* | | | | | | | | |
| Post | Full or part time | Salary grade / group (indicating allowances) | Name of establishment | Number on Roll | Age  Range | Local Authority | Date of Employment | |
| From | To |
|  |  |  |  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Do you have any additional employment which you intend to continue if appointed to this post?  Yes 🞏 No 🞏  If yes, please detail the nature of this work and the hours. | | | |
| Please give particulars of any other (non-teaching) employment from 18 years of age | | | |
| **Post / Role** | **Employer** | **Salary** | **Dates** |
|  |  |  |  |
|  | | | |
| **D : Additional Information** | | | |
| Teacher Reference Number :  To which superannuation act (if any) are you now subject (eg, Local Government, Teachers)? | | | |
| How do you meet the person specification? You may attach an additional statement in answer to this section. | | | |

|  |  |
| --- | --- |
| **E : Referees** | |
| Give names, designations and addresses of TWO persons to whom reference may be made. One should be your present (or most recent) employer.  Please note that for positions in contact with children, Framwellgate School Durham has the right to seek references from any or all previous employers and line managers prior to interview.  Appointment will only be confirmed subject to satisfactory references | |
| * ***Reference One***   Name  Position  Address  Post Code  🕿 Number  Email | * ***Reference Two***   Name  Position  Address  Post Code  🕿 Number  Email |
| Do you consider yourself to be a person with a disability? Yes/No/Prefer not to say  This may include a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities. Long-term means that it has lasted, or is likely to last, for over a year. Applicants with disabilities who are short-listed will be invited for interview if they meet the essential criteria on the person specification. | | |
| If you have answered yes, please detail below any specific requirements to assist you with an interview and we will try to make the necessary arrangements. | | |
| **Job Share**  If this post is open to job share, do you wish to apply for this post in a job share capacity?  Yes 🞏 No 🞏 | |
| Please state where you saw the advertisement for this post : | |
| This post may be subject to medical assessment | |

|  |
| --- |
| **Criminal convictions**:  The amendments to the Exceptions Order 1975 (2013) provide that certain spent convictions and cautions are ‘protected’ and are not subject to disclosure to employers and therefore cannot be taken into account. Further guidance and details on the criteria on the ‘filtering’ of these cautions and convictions can be found on the Disclosure and Barring Service website ([www.gov.uk/dbs](http://www.gov.uk/dbs)).  **Do you have any convictions, cautions, reprimands or final warnings that are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (amended in 2013)?**  **YES NO**  If YES, please provide relevant details of the offence, date of offence and sentence below. If you would prefer not to include this information on the application form, please provide the details in a sealed envelope addressed to: The Headteacher, Framwellgate School Durham, Newton Drive, Durham, DH1 5BQ marked ‘Strictly Confidential - for the attention of the Headteacher -only to be opened by the addressee’. Also please ensure that you state the job title of the job you are applying for. |

|  |
| --- |
| **Have you lived and/or worked outside of the UK within the last 5 years? Yes/No**  If yes, please provide details below: |
| **Do you have the right to work in the UK? Yes/No**  If no, please indicate the reason: |
| **Data Protection Statement**  Framwellgate School Durham is committed to confidentiality and complies with the Data Protection Act 1998. All information will be handled and stored sensitively and used only for its intended purpose. |
| **I have read the guidance notes including the information regarding Criminal Convictions and I declare that the information I have given is true in all respects. I understand that false information may render me liable for dismissal if I am appointed.**  I agree to the above statement and will sign and date a copy of this application as a true record if I am invited for an interview:  **Signature: Date:** |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **FRAMWELLGATE SCHOOL DURHAM**  **EQUAL OPPORTUNITIES MONITORING FORM** | | | | | | | |
| **Role applied for** |  | | | | | | |
| **Gender** |  | Male  Female | | | | | |
| **Age group** |  | 16 to 25  26 to 35  36 to 45  46 to 55  56 to 65  Over 65 | | | | | |
| **Religion** |  | Christianity  Hinduism  Islam  Other  No religion | | |  | Judaism  Sikhism  Buddhist  Baha’i  Prefer not to say | |
| **Ethnic origin** | White: | | | | Black or Black British: | | |
|  | British  Irish  Any other white background | | |  | Caribbean  African  Any other Black background | |
| Arab or Middle Eastern: | | | | Travelling Community: | | |
|  | Arab  North African  Any other Arab or Middle Eastern background | | |  | Gypsy / Roma  Traveller of Irish Descent  Other travelling community | |
| Asian or Asian British: | | | | Mixed: | | |
|  | Indian  Pakistani  Bangladeshi  Chinese  Any other Asian background | | |  | White & Black Caribbean  White & Black African  White & Asian  Any other Mixed background | |
| Other ethnic groups (please state): | | | | Prefer not to say: | | |
|  | | | |  | Prefer not to say | |
| **Sexuality** |  | Heterosexual / Straight  Bisexual  Gay Man  Gay Woman / Lesbian  Prefer not to say | | |  |  | |
| **Disability** | **Do you consider yourself to be a person with a disability?**  This may include a physical or mental impairment which has a substantial and long-term adverse effect on your ability to carry out normal day-to-day activities. Long-standing means that it has lasted, or is likely to last, for over a year. | | | | | | |
|  | Yes |  | No | |  | Prefer not to say |